

STUDENT TRAVEL APPROVAL FORM

Organization: _____

Date of Travel: _____

Requested By: _____

Description of Travel: _____

Reason for Travel: _____

Funding Sources: _____

Advisor Attending: _____

TRIP SPONSOR CONTACT INFORMATION

Name: _____

Cell Number: _____

Submitted By: _____ **Date:** _____

Trip Sponsor

Approved By: _____ **Date:** _____

Director of Student Activities

Approved By: _____ **Date:** _____

**Dean of Student Services OR
Vice President for Academic Affairs**